FORM 54A INSOLVENCY ACT

INSOLVENCY REGULATIONS, 2014 APPLICATION FOR TRUSTEE LICENCE(CORPORATION) (Pursuant to Section 230 of the Act)

General Information(Form 54A)

Name of Corporation (pre-approved by the Registrar)	Miranda Weiss	Email	pihixepu@mailinator.com		
Address of Head Office	Suscipit laboriosam do esse sit	eos rerum amet			
Telephone		Fax No	+1332696-9979		
Incorporated Other countries in which the corporation registered	No				
Date of Incorporation	09-22-1999	For which Licence is requested	Est molestiae ea ut		

I, Miranda Weiss, the undersigned, do solemnly declare that I am authorized to submit the present application on behalf of the
corporation named herein and that the information set out in this application and in the attached documents is, to the best of my
knowledge and belief, true, correct and complete in all respects.

Signature of Applicant, on behalf of the Corporation

Date of Incomparation	09-04-2025
Date of Incorporation	09-04-2025

Documents List(Form 54A)

Please fill out this page and return with your qualification. If any items are not checked off, please indicate the reason for such information being excluded and the date at which it will be provided. (Form 54A)

The original or a certified true copy of the constituting documents(letters patent, certificate of incorporation, memorandum or articles of association and other pertinent documentation)		Reason for Non- Provision		Date expected to be Provided		
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The address of the head office and of every other office or place of business from which the corporation intends to provide bankruptcy services	Reason for Non- Provision	Date expected to be Provided
The personal balance sheet of the firm's managing trustee (as of the date of the application)	Reason for Non- Provision	Date expected to be Provided
The name, residential address and occupation of each shareholder and each person having an indirect proprietary interest in the corporation (including beneficial owner, where applicable)	Reason for Non- Provision	Date expected to be Provided
The number of share (or proportion of total shares)and the classes of shares held by each of the corporation	Reason for Non- Provision	Date expected to be Provided
A list indicating every trustee who is simultaneously a shareholder (or financial backer) of this corporation and the district(s) in which they operate	Reason for Non- Provision	Date expected to be Provided
The name, residential address and the occupation of each director and of each officer of the corporation	Reason for Non- Provision	Date expected to be Provided
The name and business address of every licensed trustee who will practice in an office or place of business of the corporate trustee	Reason for Non- Provision	Date expected to be Provided
Evidence of insurance coverage (professional liability insurance)	Reason for Non- Provision	Date expected to be Provided
A cheque for [\$] made out to the order of the Supervisor of Insolvency of Jamaica This must be uploaded at the next page-payment page	Reason for Non- Provision	Date expected to be Provided
Details of necessary resources (work facilities, equipment and personnel) available for each office at which the corporate trustee intends to provide bankruptcy services, as well as details of banking arrangements	Reason for Non- Provision	Date expected to be Provided
Where the trustee responsible for the administration of estates is being replaced, a letter indicating which trustees assuming responsibility for these estates, and the signature of that trustee confirming his/her acceptance of the transfer	Reason for Non- Provision	Date expected to be Provided

Supporting Documents

1. The original or a certified true copy of the constituting documents
2. The address of the head office and of every other office or place of business from which the corporation intends to provide bankruptcy services.
3. The personal balance sheet of the firm's managing trustee
4. The name residential address and occupation of each shareholder and each person having an indirect proprietary interest in the corporation
5. The number of share and the classes of shares held by each of the corporation.
6. A list indicating every trustee who is simultaneously a shareholder of this corporation and the district in which they operate.
7. The name and business address of every licensed trustee who will practice in an office or place of business of the corporate trustee.
8. Evidence of insurance coverage
9. A cheque for made out to the order of the Supervisor of Insolvency of Jamaica
10. Details of necessary resources
11. Where the trustee responsible for the administration of estates is being replaced
Payment Method